Sunrise Report November 1, 2020

A request for an expansion of the scope of practice for the profession of dentistry to include the administration of botulinum toxin type A (BOTOX) and dermal fillers for cosmetic purposes

Submitted by:





Arizona Dental Association

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President Karen Fann Speaker Rusty Bowers Arizona State Legislature 1700 West Washington Street Phoenix, AZ 85007

Dear President Fann and Speaker Bowers,

The Arizona Dental Association (AzDA), pursuant to Arizona Revised Statutes Sections 32-3104 and 32-3106, submits the following sunrise report requesting an expansion of the scope of practice for the profession of dentistry.

The proposal would allow dentists to administer botulinum toxin type A (BOTOX) and dermal fillers to patients in need of both therapeutic and cosmetic services. The administration of BOTOX by dentists is currently allowed only for therapeutic services that relate directly to a patient's dental needs. The proposed change of scope would expand the definition to include cosmetic purposes in the oral, peri-oral or facial structures.

As you know, dentists play an integral part in delivering health care services to Arizonans. Utilizing dentists to provide specialized BOTOX services for medical conditions such as orofacial pain, or cosmetic conditions that greatly affect a patient's self-esteem and quality of life, would be a great service to Arizonans in need of such treatment.

AzDA has begun conducting preliminary meetings with various stakeholders on this proposal with the hope of addressing any concerns prior to the introduction of legislation. We appreciate your consideration, and please contact us anytime with questions or if you require further information.

Sincerely,

Brian Powley DDS

Chairman Council Government Affairs

Arizona Dental Association

Background

The current Arizona Dental Practice Act (ARS 32-1202) defines the practice of dentistry as "...the diagnosis, surgical or nonsurgical treatment and performance of related adjunctive procedures for any disease, pain, deformity, deficiency, injury or physical condition of the human tooth or teeth, alveolar process, gums, lips, cheek, jaws, oral cavity and associated tissues, including the removal of stains, discolorations and concretions." The Arizona Dental Association (AzDA) is requesting a change to the scope of the Dental Practice Act to allow dentists to administer botulinum neurotoxin (Botox, Xeomin, Dysport, etc.) and dermal fillers (Juvederm, Restylane, Sculptra, etc.) for the functional or cosmetic enhancement of the gums, cheeks, jaws, lips, the oral cavity and associated structures of the maxillofacial areas. The dentist must have either received satisfactory training in these procedures from a dental institution accredited by the Commission on Dental Accreditation (CODA) or successfully completed a specific training program/continuing education course, such as required by the American Academy of Facial Esthetics (AAFE), in injectables and facial fillers. (The American Dental Association recognizes the AAFE as the premier choice for Botox and dermal fillers training/continuing education).

Arizona dentists are trained specialists in facial, peri-oral and oral structures. They are currently permitted to administer Botox only for "dental therapeutic purposes" that are "in conjunction with managing a patient's dental needs." However, as an example, many dental patients complain of cosmetic outcomes of dental treatment, but their problem is not with their teeth. It is with the musculature around their lips or the lips themselves. In some cases, Botox offers a remedy which otherwise would require extensive surgical procedures, such as surgical removal of underportions of the lips. However, the current scope of practice would need modification to allow for such procedures.

Botox has an incredible safety record and gives patients a non-surgical alternative for those concerned about the higher safety risks associated with surgical procedures. While the public health and safety will not technically be harmed without implementation, allowing dentists to administer injectables and facial fillers for cosmetic purposes gives the general public increased access to care to another provider who is trained in such procedures and can safely administer them.

Botox is already a medically reimbursable procedure for certain diagnosis codes. Purely cosmetic procedures would have not financial impact on insurance or third-party reimbursements.

Dental practices across Arizona are asking for injectable pharmacologics to be offered in their dental office. Oftentimes the patients are already anesthetized for a dental procedure and if the dentist was able to offer Botox or dermal fillers the patient would then be best served. If dentists cannot perform what a patient requests, the patient will be forced to go to another provider they do not know or will decide not to get the desired treatment. This change in the scope of practice will greatly increase access to these procedures for the general public.

1. Why an increased scope of practice is beneficial, including the extent to which health care consumers need and will benefit from safe, quality care from practitioners with this scope of practice.

The more than 2,500 dentists AzDA represents already have the appropriate education and training to administer BOTOX and other similar treatments, as evidenced by the fact such treatment is already allowed under the current scope of practice if it is for "dental therapeutic purposes" that are "in conjunction with managing a patient's dental needs." As many Arizonans see their dentists more regularly than their primary care provider, it makes increasingly more sense to allow dentists to administer BOTOX for other recognized patient therapeutic or cosmetic needs in the facial, perioral and oral structures. If patients could receive such treatment from their dental provider, it would be from a qualified, medically trained professional, and often could be administered as part of an overall dental treatment plan. Expanding the number of BOTOX providers in Arizona who can administer both therapeutic or cosmetic BOTOX to address patient needs will provide a much-needed resource for those Arizonans through their trusted oral healthcare provider rather than having to seek a separate provider who, in some cases, may not have the same medical training as a dentist.

Licensed dental practitioners in Arizona routinely provide injections in the head and neck. One could argue that it is more difficult to administer an inferior alveolar nerve block inside an oral cavity than to administer a BOTOX injection in easily accessed areas of the facial structure. Dentists have significant college education, licensure requirements, and can administer such injections without additional training and education. Other professions in Arizona are allowed under law, with proper advanced training, to administer cosmetic BOTOX injections in the head and neck regions, and in many cases these professionals – including Registered Nurses, Licensed Practical Nurses, Advanced Practice Registered Nurses, Cosmetologists, Aestheticians and Certified Laser Technologists -- have far less education, training and experience than dentists, who administer far more difficult injections in these regions on a near-daily basis, and have specific, rigorous medical training to protect patient safety.

2. Whether those health professionals seeking an increased scope of practice currently have or required didactic will be to have clinical education from accredited professional schools training or from recognized programs that prepare perform the proposed scope of practice and details on what that education or training includes.

Arizona's dentists are Doctors of Dental Medicine or Dental Surgery and allowing them to administer BOTOX treatment for cosmetic purposes will provide opportunities to deliver improved care and promote better public health. This proposed scope expansion is based on dentists having the appropriate clinical knowledge and competency to perform tasks in a manner consistent with the prevailing standards of care. Dentists already have the training to administer BOTOX treatment for therapeutic purposed directly related to a patient's dental needs.

In Arizona, a dentist must successfully complete an advanced graduate or post-graduate program in pain control to obtain a Section 1301 permit to administer general anesthesia. BODEX rules require the year program to have included: anatomy and physiology of the human body; physiological risks for the use of various modalities of pain control; psychological and physiological need for various forms of pain control and the potential response to pain control procedures; techniques of local anesthesia, sedation, and general anesthesia; psychological management and behavior modification, as they relate to pain control in dentistry; and handling emergencies and complications related to pain control procedures. BODEX specifies that the program must include the didactic and clinical training in all the above-mentioned areas to receive a Section 1301 permit to administer general anesthesia. To maintain the Section 1301 permit, BODEX requires 30 hours of continuing education every five years in general anesthesia and confirmation of completed coursework in advanced cardiac life support, pediatric advanced life support, and a recognized course in advanced airway management.

The Commission on Dental Accreditation (CODA) was established in 1975 and is nationally recognized by the United States Department of Education as the sole agency to accredit dental and dental related education programs conducted at the post-secondary level. CODA's mission is to serve the oral health care needs of the public through the development and administration of standards that foster continuous quality improvement of dental and dental related educational programs. CODA is responsible for accrediting more than 1,400 dental educational programs across a vast array of discipline-specific education areas throughout the nation.

Though there is no accreditation standard for dental schools related specifically to BOTOX administration, the standards are considered minimum which schools can obviously teach beyond. In the states that have passed legislation to allow dentists to administer BOTOX for cosmetic purposes, a training and/or continuing education component in BOTOX and dermal filler administration was typically a requirement under their enabling statutes. The same would be true for Arizona since, as stated above, the dentist must have either received satisfactory training in these procedures from a dental institution accredited by the Commission on Dental Accreditation (CODA) or successfully completed a specific training program/continuing education course, such as required by the American Academy of Facial Esthetics (AAFE), in injectables and facial fillers.

3. Whether the subject matter of the proposed increase scope of practice is currently tested by nationally recognized and accepted examinations for applicants for professional licensure and the details of the examination relating to the increase scope of practice.

Currently, Arizona's dentists are required to have graduated from an ADA accredited school of dentistry, successfully passed the National Dental Board examination and an Arizona Board of Dental Examiners (BODEX) approved clinical examination within the last five years to receive a license by examination. Dentists who passed a BODEX approved clinical examination in another state or region may apply for a licensure by credential. Additionally, initial applicants are required to pass the Board's jurisprudence exam related to Arizona's dentistry statutes and rules. The licensed dentist must have either received satisfactory training in injectable cosmetic procedures from a dental institution accredited by the Commission on Dental Accreditation (CODA) or successfully completed a specific training program/continuing education course, such as required by the American Academy of Facial Esthetics (AAFE), in injectables and facial fillers.

4. The extent to which the proposed increased scope of practice will impact the practice of currently licensed those are state or the entry into practice of those have relocated from individuals who other states with substantially equivalent for requirements registration, certification, or licensure as this state.

This desired scope expansion will not impact the practice of any existing dental licensee. Dentists who obtain appropriate training or certification in BOTOX administration will be allowed to administer such treatments for cosmetic purposes pursuant to this expansion of scope. Other dentists, including those who relocate to Arizona from another state, will have the opportunity to seek authorization to administer BOTOX treatments for cosmetic purposes.

5. The extent to which implementing the proposed increased scope of practice may result in savings or a cost to this state and to the public.

This proposed scope expansion would not result in any increased cost to the State of Arizona. Savings could potentially result from a patient obtaining needed BOTOX treatments that are reimbursable through the Arizona Health Care Cost Containment System (AHCCCS), since a patient could utilize their dental provider for such services as part of other dental treatment rather than having to seek such treatment from a separate medical professional.

6. The relevant health profession licensure laws, if any, in this or other states.

As stated above, the Arizona Dental Practice Act (ARS 32-1202) defines the practice of dentistry as "...the diagnosis, surgical or nonsurgical treatment and performance of related adjunctive procedures for any disease, pain, deformity, deficiency, injury or physical condition of the human tooth or teeth, alveolar process, gums, lips, cheek, jaws, oral cavity and associated tissues, including the removal of stains, discolorations and concretions." Arizona dentists are trained specialists in facial, peri-oral and oral structures. They are currently permitted to administer Botox only for "dental therapeutic purposes" that are "in conjunction with managing a patient's dental needs."

The administration of BOTOX treatments by dentists is an evolving national structure. Over roughly the past 20 years, many state dental boards have considered the use of BOTOX treatments by dentists. The dental boards of Arizona, Arkansas, California, Colorado, DC, Florida, Georgia, Indiana, Louisiana, Maine, Maryland, Michigan, Mississippi, New Jersey, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Tennessee, Texas, Virginia, Washington State and West Virginia, for example, have agreed it is within the scope of practice for properly trained dentists to administer Botox injections in some instances.

The use of Botox is considered a common treatment for various forms of facial pain. In March 2020, the American Dental Association <u>officially recognized</u> orofacial pain (OFP) as a dental specialty. The American Academy of Orofacial Pain defines OFP as "the specialty of dentistry that encompasses the diagnosis, management, and treatment of pain disorders of the jaw, mouth, face and associated regions." The Academy also says "OFP disorders include but are not limited to temporomandibular muscle and joint (TMJ) disorders, jaw movement disorders, neuropathic and neurovascular pain disorders, headache, and sleep disorders." Lastly, in a document published by the National Center for Biotechnology Information (an organization under the umbrella of the National Institutes of Health), a <u>study</u> ("Improvement of chronic facial pain and facial dyskinesia with the help of botulinum toxin application") concluded that, "Botulinum toxin type A (BTX-A) can be a safe and effective therapy for certain forms of facial pain syndromes."

7. Recommendations, if any, from the applicable regulatory entity or entities, from the Department of Health Services and from accredited educational or training programs.

The Arizona Board of Dental Examiners (BODEX) formed a committee in 2019 to consider the issue of pursuing legislation that would accomplish the same goals described in this Sunrise Report. The Botox and Dermal Fillers Committee met on November 1, 2019 and recommended that the full BODEX board vote to pursue language that would increase the current scope in the Dental Practice Act to allow both dentists and hygienists to provide Botox and other dermal fillers without the requirement that it also be part of a dental procedure. Legislation was

ultimately introduced in the 2020 Regular Session ($\underline{\text{HB 2134}}$), though it did not proceed through the legislative process.